

Print Name: Tichard WWright ID# 187140 Date of Birth Nature of problem or request: NEED To Kr From Bullock, Need profile For blured vission at times. Al- aches With St. Finess of Joins DO NOT WRITE BELO	1: Aug 15, 1967 Location: 9B Bed 4 Top NOW IF glasses has arrived or a lack Key Look due to fernatives measure For head to and Bones Rich W Weight Liv. Signature
Date:/ Time: AM PM Allergies:	RECEIVED Date: Time: Receiving Nurse Intials
(S)ubjective:	
(O)bjective (V/S): <u>T: P:</u>	R: BP: WT:
(A)ssessment: (P)lan:	POR PROPESSIONAL USE ONLY CONFIDENTIAL RECORD NOT TO BE PHOTO COPIED
Refer to: MD/PA Mental Health Dental Dai CIRCLE Of Check One: ROUTINE () EMERGENCY (If Emergency was PHS supervisor notified: Was MD/PA on call notified:	NE) Yes() No() Yes No()
SIG	NATURE AND TITLE

WHITE: INMATES MEDICAL FILE



Print Name: Richard W Wright Sr. Date of Request: Aug 8, 2005 ID # 187140 Date of Birth: Aug 15, 1967 Location: 10-8/55-8 Nature of problem or request: Need Some type of support to absorb the Shock From running and Walking. How can I obtain a Key lock, For Sgf Flowers claims they do not give master lock For immates with Vision problems Tidd W Wright de.
DO NOT WRITE BELOW THIS LINE ON PROPESSIONAL USE ONLY
Time: /// AM PM Allergies: TW Part Date: 8/8/05
Allergies: Tylenof Date: 8(8(05)
Time: (1'. 45
D2Sat=97% Receiving Nurse Intials
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(A)ssessment:
(P)lan: Ofpt. withms. 7 loupl, CRNP-8/18/05=8:30
Refer to: MD/PA Mental Health Dental Daily Treatment Return to Clinic PRN CIRCLE ONE
Check One: ROUTINE (X EMERGENCY ()
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SIGNATURE AND TITLE



FOR PROPESSIONAL USE ONLY CONFIDENTIAL RECORD

PRISON HEALTH SERVICES, INC. SICK CALL REQUEST

HEALTH SERVICES SICK CALL REQUEST	. 13.
INCORPORATED	14 R.W.W.
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	iest: July 18,2005
ID# 18.1140 Date of Birth: DHug 6	7Location: 6-B bed#1
Nature of problem or request: Sores and tender spots after taken T.B. skin test. Need insoles	arch Supports For
Boots Need a master Lock (profile) For	
some thing For head aches,	Placed on diet to
increase body Weight Backto normal. Rin	L W. Weight, edu.
DO NOT WRITE DELOW THIS LIN	Signature
DO NOT WRITE BELOW THIS LIN	(E
Date: 7/5/65	
Time: AM PM REG	CEIVED
Allergies: Typen Date: 7-13	1 119
Time: Receiving N	
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(S)ubjective: John Alexander Control of the Control	1. D. 1+ And a. Th
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(A)ssessment:	John Machine
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PRISON HEALTH SERVICES, NONFIDENTIAL RECORD

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Print Name: Richard W. Wright, Sr. Date of Request: July 12, 2005 ID# 187140 Date of Birth: 15Aug 67 Location: 68/18 Nature of problem or request: Sores and tender spots on Face and head after taken T.B. Skin test. Need insoles / arch Supports For Boots. Need a master Lock (profile) For blurred Vision. Am I Still scheduled to see the eye doctor?

(P) land Robert Day Manual Detail Daily Treatment (P) Month Mental Health Dental Daily Treatment (P) If Emergency was PHS supervisor notified: Yes () No () 8/100 Am-appt With Manual (P) In Manual (P) In Mental Health Dental Daily Treatment (P) In Manual	DO NOT WRITE BELOW THIS LINE	
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Print Name: Richard WWright, Sr ID # 187140 Date of I Nature of problem or request: Need s _aches, Placed on Die	Date of Request: July 12,2005 Birth: 15 Aug 67 Location: 681 18 Some fhing For head
Weight back to norm	nal
*2	Richard W. Waight So.
DO NOT WRITE B	ELOW THIS LINE
Date: // 5/0 AM PM Allergies: Two half	RECEIVED Date: 7-13-05 Time: 1(1,50) Receiving Nurse Intials
(S)ubjective: Aladache Cone m4-5 days - Pain len	
(O)bjective (V/S): T: Selp:	
(A)ssessment: See Pagl	CONFIDENTIAL RECO
(P)lan: Refer & DV. Ray	agati 7/14/05/8100 Am
	Daily Treatment Return to Clinic PRN
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GLF-1002 (1/4)

PRISON HEALTH SERVICES, INC. SICK CALL REQUEST

Print Name: Richard W. Wright ID# 187140 Date of Nature of problem or request: Having Spots) and intching aff test again	
	Richard W. Wingt Jr., Signature
DO NOT WRITE I	BELOW THIS LINE
Date: (/30/0) Time: 5 pm AM PM Allergies: W	RECEIVED Date: 4-30-05 Time: 11:45 Receiving Nurse Intials
(S)ubjective: Im Sether the IB offen le the also my scalle of the IB offen le the also my scalle of IB she test to structuration (O) bjective (V/S): T: P: P: I Set and They won	esterne there like before est. Everywhere I howe 9 Scan his the 4th time Die hard 9 figor. Stephae to take it es
Querter X3- Son ambula	led not let me out until Sugreed to tel to HI UC Dteach gant alent act however have many fine at B Shirs test sines 6/24/25 fame to Spots to army chest, & Meg-
(P)lan: Refer to Dr. Rayo	gati 7/1/05-8100Am
Check One: ROUTINE (X EMERGENC	LE ONE CY () POR PROPEGNOMAL USE CALL
If Emergency was PHS supervisor notification was MD/PA on call notification with the supervisor notification was MD/PA on call notification with the supervisor notification was PHS supervisor notification was provided by the supervisor notification was p	Fied: Yes() No CONFIDENTIAL PLECOF No CONFIDENTIAL PLECOF NOT TO BE PHOTO COPIED SIGNATURE AND TITLE
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P. 1.111 . 11 5	
Print Name: Richard W Wright Sr. Date of Request: June 28, 2005 ID # 187140 Date of Birth: 15 Aug 67 Location: (6-B)/1-B Nature of problem or request: Having another reaction in	
Nature of problem or request: Having another reaction in	
Skin after taken M.B. skin test. What	
Should I do?	
D. 1 1111. N. 1	
Dichal W Waft Hum. Signature	
DO NOT WRITE BELOW THIS LINE	
Date: 6 129/03	
Time: 3 100 PM AM PM RECEIVED Date: $6 - 29 - 05$	
Time: \\', \(\) Receiving Nurse Intials	
Receiving Ivuise Initials	
(S)ubjective:	
(O)bjective (V/S): T: P: R: BP: WT:	
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(A)ssessment:	K (~)
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NOT TO BE PHOTO CO	PRE
(P)lan:	
Refer to: MD/PA Mental Health Dental Daily Treatment Return to Clinic PRN CIRCLE ONE	
Check One: ROUTINE() EMERGENCY()	
If Emergency was PHS supervisor notified: Yes () No ()	
Was MD/PA on call notified: Yes () No ()	
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Print Name: Richard W. Wright, Sr. Date of Request: June 21, 2005 ID# 187140 Date of Birth: Aug 15, 67 Location: 9-B (Seg.) Nature of problem or request: Popping and Stiffness injoints, Still having Frequent head aches, Once release From (Seg.) Could I be placed on a diet which will increase my weight back to normal. Have glasses return? I need my blood Sugar level Cheak. Richard W. Wright, Sr. Date of Request: June 21, 2005 Richard W. William 1, Sugarties
DO NOT WRITE BELOW THIS LINE
Date: U10105 Time:/100 AM PM Allergies:/0KA RECEIVED Date: 6-33-05 Time: 330 Receiving Nurse Intials
(S)ubjective: See About CONFIDENTIAL PIEC NOT TO BE PHOTO COPE
(O)bjective (V/S): T: 989 P: 70 R: 18 BP:/00/80 WT://
(A)ssessment: alt in lamfact-
(P)lan: Sefer to Dr. Rayapati on Muno. 4/23/05 (2)
Refer to MD/PA Mental Health Dental Daily Treatment Return to Clinic PRN CIRCLE ONE Check One: ROUTINE (*) EMERGENCY () If Emergency was PHS supervisor notified: Yes () No () Was MD/PA on call notified: Yes () No ()
T. Stauls, Gov. SIGNATURE AND TITLE

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	J. 2000
Print Name: Nich Ard Wright St. ID # 187140 Date of Bir Nature of problem or request: Could	Date of Request:
TD#	th:/37/49 67 Location: 7-13 5eq)
ievt) Check	L have my sugar
TELL CHELK	
	Rich W akut de
	Signature
DO NOT WRITE BEI	LOW THIS LINE
Date: <u>640</u> AM PM	RECEIVED
Allergies:	Date: (e -) C C C C C C C C C C C C C C C C C C
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(O)bjective (V/S): <u>T:</u> <u>P:</u>	R: BP: WT: 170
(A)ssessment: Calteration in acru	,
(P)lan: to see Dn. Rayapati in	6-21-05 @ 800 am
E. heep appointment as a	schedule
Refer to: MD/PA Mental Health Dental D. CIRCLE	
Check One: ROUTINE () EMERGENCY (If Emergency was PHS supervisor notified Was MD/PA on call notified	() l: Yes () No ()
A Solvempur	
SI	GNATURE AND TITLE

WHITE: INMATES MEDICAL FILE



Print Name: Richard W. Wright Date of Request: June 20, 2005 ID # 187140 Date of Birth: 15 Aug 67 Location: 9-B (Seq.) Nature of problem or request: Popping and stiffness in joints, Still having Frequent head aches, once release From (Seq.) Could I be placed on a Diet which will increase my weight back to normal have Glasses returned: Richard Weight back to normal have Glasses returned: Signature DO NOT WRITE BELOW THIS LINE
Date: 6/20/0S Time: 640 AM PM Allergies: RECEIVED Date: 6-20 S Time: 3/15 Receiving Nurse Intials
(S)ubjective: Inhaving frequent headache il'n havery stiffiners and popping spirits. I need my blood sugar check
(O)bjective (V/S): T: 99.4 P: 90 R: 20 BP: 1/8/86 WT: 170
(O) bjective (V/S): T: 99.4 P: 90 R: 20 BP: 1/8/86 WT: 170 Ombulatory to HCU Steady gait (Via 2 ppieces) Skin W/S (A) ssessment: Official in comford CONFIDENTIAL RECO
(P)lan: to see Dn. Rayapati on 6-21-05. @ 800mm
Refer to: MD/PA Mental Health Dental Daily Treatment Return to Clinic PRN CIRCLE ONE Check One: ROUTINE () EMERGENCY () If Emergency was PHS supervisor notified: Yes () No ()
Was MD/PA on call notified: Yes () No ()
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WHITE: INMATES MEDICAL FILE

YELLOW: INMATE RETAINS COPY AFTER NURSE INITIALS RECEIPT

GLF-1002 (1/4)